



CONFIDENTIALITY and ACKNOWLEDGEMENT STATEMENT

- I understand that I am required to report to the VIVA Program Staff the total number of hours performed as a volunteer or intern per month, no later than the fifth of each month.
- I understand that I am required to complete the Confidentiality and Human Rights Training within 30 days of beginning my internship or volunteer service. Unless given written permission from VIVA Program staff, if I have not completed the CSB Confidentiality and Human Rights Training within the first 30 days of my placement, I must discontinue my internship or volunteer service until I have completed the training.
- I understand that I am required to complete a screening or test for tuberculosis within 30 days of beginning my volunteer service or internship. If I have had a prior TB test which is no older than six months old, I must submit a copy of that test result within 30 days of beginning my volunteer service or internship. Proof of a current TB test is to be kept in my file in the VIVA Program files. I further understand that a TB test or screening may be required annually if I continue in the VIVA Program, depending on the site to which I'm assigned.
- I understand that, if I am required to be fingerprinted, I must do that immediately, following the procedures explained to me by VIVA Program staff.
- I will maintain confidentiality in order to protect the rights of individuals served, families, and staff, as well as the integrity of the Fairfax-Falls Church Community Services Board (CSB).
- I have a legal, as well as ethical, responsibility to ensure the privacy and confidentiality of individuals of this agency.
- I understand that I am a mandatory reporter of child, elder or disabled persons abuse, neglect or exploitation under Virginia codes 63.2-1509 and 63.2-1606.
- I understand that during the time I volunteer, intern or serve as resident or advocate with the CSB, I may come in contact with information that is to remain confidential (e.g., files, letters, names of individuals, etc.). I understand that all such information is to be held in confidence not only during my time as a volunteer, intern, resident or advocate, but after I leave my placement as well.
- I understand that violations of confidentiality or security could result in disciplinary action and/or termination of my role with the CSB.
- I have received a copy of the Standards of Conduct and Code of Ethics from the Fairfax County which addresses:
 - The Standards of Conduct and their application to Leave and Attendance; Personal Behavior and Conduct; Protection and Proper Use of County Data, Property, Funds and Records; Driving; Safety; and Conflict of Interest/Political Activities of Employees.
 - The Code of Ethics for the CSB, Fairfax County and the applicable national boards (NASW, ACA, APA) and the core principles of Honesty, Public Service, Respect, Responsibility, Stewardship and Trust.

My signature below confirms I have read, understand, agree to follow, and had the chance to ask questions and receive answers about these documents and policy.